

In re Appln. of Glover et al.  
Application No. 09/869,637

## REMARKS

### Summary Of The Office Action

Claims 1-10, originally pending in the application, have been rejected.

The Drawings are Objected to, and Applicants are requested to insert the legend "Prior Art" on FIG. 1.

A new abstract is requested on a separate sheet.

The title is deemed non-descriptive, and a substitute title is requested.

Claims 1-3, 5, 6, and 8-10 are rejected under 35 U.S.C. 103(a) as being unpatentable over Applicants' Admitted Prior Art (AAPA).

Claims 4 and 7 are rejected under 35 U.S.C. 103(a) as being unpatentable over AAPA in view of Knoche (DE 43 16 643).

### Applicants' Response

In response to the objection to FIG. 1, Applicants have submitted herewith a drawing amendment with the suggested PRIOR ART legend.

A copy of the Abstract is included on a separate page.

Applicants have amended the Title to be more descriptive of the claimed invention.

Applicants have amended claims 1, 5, 6, 7 and 9 to more clearly claim the invention.

None of the claims are believed to narrow the claims, nor are they intended to be in response to any current rejection.

Applicants traverse the rejection of claim 1-3, 5, 6, and 8-10 in section 7 of the Office Action as obvious over AAPA. The AAPA, illustratively depicted in FIG. 1, comprises a system wherein all the components are integrated within the structure of a trolley. As implicitly admitted by the Office Action, at the end of the first paragraph on page 4 of the Office Action, Applicants' admitted prior art depicted in FIG. 1 does not disclose separating particular components in an IVUS system so that a catheter interface module, display monitor and control device are positioned adjacent the bed while the signal processing data entry and data storage device are positioned remotely from the bed at a sufficient distance to enable a clear space around the bed -- as recited at the end of Applicants' currently pending claims 1 and 9.

Applicants invention is directed to separating particular components between a first set that are located bedside and a second set that are located remotely from the bed to improve space

In re Appln. of Glover et al.  
Application No. 09/869,637

management in a catheter lab. These elements, recited at the end of both claim 1 and claim 9, are neither disclosed nor suggested in FIG. 1 wherein the components are clearly not capable of being separated into beside and remote locations. In the event that the rejection of claims 1 and 9 is not withdrawn, Applicants specifically request provision of a reference supporting the assertion that arranging the IVUS system components in the manner recited in claims 1 and 9 was known in, or suggested by the teachings of, the prior art at the time of the invention.

Applicants traverse the rejection of claim 2 and claim 10 since no reference has been provided in support of the rejection. In the event that the rejection is not withdrawn, Applicants request provision of a reference supporting the assertion that it would have been obvious to locate any of the recited devices remotely in the context of the claimed invention.

Applicants traverse the rejection of claim 3 for at least the reasons set forth above regarding the rejection of claim 1.

Applicants traverse the rejection of claims 5 and 6. Applicants do not dispute that it is known to provide additional imaging means while using a catheter. However, Applicants are unaware of any suggestion, nor has the Office Action provided documentary support, for integrating IVUS and other imaging system components into a single system as recited in claims 5 and 6 (now clarified by the current amendment). In the event that the rejection is not withdrawn, Applicants request provision of documentary support for the Office Actions alleged known teachings in the prior art to combine the components into a single system.

Applicants traverse the rejection of claim 8. The Office Action asserts that it was known or suggested by the prior art to mount the display monitor upon the catheter interface module. However, no reference is cited in support of this assertion. In the event that the rejection is not withdrawn, Applicants request provision of a reference supporting this alleged teaching/knowledge in the prior art.

Applicants traverse the rejection of claims 4 and 7 in section 8 of the Office Action over AAPA in view of Knoche (DE 43 16 643). Applicants traverse the rejection of claims 4 and 7 for at least the reasons previously set forth above regarding claim 1. The AAPA does not disclose or suggest separating components of an IVUS system such that particular components are located adjacent a patient's bed while other components are located remotely from the patient's bed. While Knoche does appear to disclose a speech recognition component and an infrared remote control, it does not suggest incorporating the device into the system recited by

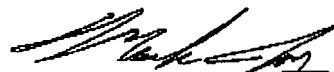
In re Appln. of Glover et al.  
Application No. 09/869,637

claim 1. In fact, in the system depicted in FIG. 1, there does not appear to be any substantial reason to incorporate either of these two means for remotely communicating commands/control instructions since the system depicted in FIG. 1 must be located bedside during use. Thus, the suggestion to combine the teachings of Knoche with the system depicted in FIG. 1 does not appear to exist in the prior art.

#### CONCLUSION

The application is considered in good and proper form for allowance, and the Examiner is respectfully requested to pass this application to issue. If, in the opinion of the Examiner, a telephone conference would expedite the prosecution of the subject application, the Examiner is invited to call the undersigned attorney.

Respectfully submitted,



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